

Instructor Activity and Payment
Required for Funded and Unfunded Courses
Michigan Department of Labor & Economic Growth
Bureau of Construction Codes & Fire Safety / Office of Fire Fighter Training
P.O. Box 30700, Lansing, MI 48909
517-373-7981

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Funded
Unfunded

COURSE NAME	START DATE	END DATE	COURSE NUMBER
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Status: **C = Certified** **P = Probationary** **O = Other (Refer to instructions on back)**

Instructor of Record (Last Name, First Name, Middle Initial)	Status	Social Security Number*	Hours	Payment	OFFT Use Only

Additional Instructors / Evaluators (Last Name, First Name, Middle Initial)	Status	Social Security Number*	Hours	Payment	OFFT Use Only
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					

Total

Payment to Organization

Name of Organization	Federal ID Number	Course Payment

Comments

Signatures

Knowingly reporting false information shall result in decertification of the responsible instructor and/or course manager.

COURSE MANAGER OR INSTRUCTOR OF RECORD NAME (Print)	COURSE MANAGER OR INSTRUCTOR OF RECORD SIGNATURE	DATE

Authority: 1966 PA 291
Completion: Required
Penalty: Payment will not be issued

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

*This information is confidential. Disclosure of confidential information is protected by the Federal Privacy Act.

Original: Lansing Office w/ Final Paperwork
Copies: Lansing Office w/ Final Paperwork
Course Manager

Instructions for Instructor Evaluation

Electronic Completion - This form may be completed electronically and printed. In order to save your completed form, you must have the full version of Adobe Acrobat.

General Information

- The BCCFS-250 Instructor Activity and Payment form is used to track instructor activity and to invoice payment.
- The Course Manager is responsible for submitting the BCCFS-250 form with the final course paperwork upon completion of **every course, whether funded or unfunded.**
- Illegible or incomplete forms will be returned and delay processing of final paperwork.

Funding - Indicate if course is funded or unfunded.

Course Name; Start Date; End Date; Course Number - Enter information from the BCCFS-110 Course Approval form. Note: If the start date or end date has changed, enter the revised date from the BCCFS-111 Course Change/Cancellation form.

Instructor of Record - Enter instructor name from the BCCFS-110 Course Approval form. Note: If the instructor of record has changed, enter the instructor name from the BCCFS-111 Course Change/Cancellation form.

Status - Enter status: "C" = Certified; "P" = Probationary; "O" = Other, e.g., a non-instructor who is an evaluator for the practical skills portion of a FF I & II. In the comments section of the form, explain the function of any individual who is given an "O" status.

Social Security Number - Enter social security number for each individual.

Hours - Enter the total number of hours each instructor taught in the course.

Payment - If a funded course, enter the individual payment due from the Office of Fire Fighter Training (OFFT). **Note: Individuals must be registered with the State of Michigan to receive payment. If not registered, individuals should download the W-9 form from the bureau's web site at www.michigan.gov/bccfs (click on Forms, Office of Fire Fighter Training) or call the OFFT at 517-373-7981.**

Additional Instructors/Evaluators - In addition to the instructor of record, list all other instructors/evaluators who participated in the course along with their personal information, whether receiving payment or not.

Total - Total the instructor payment column. Note: The total payments cannot exceed the amount listed on the BCCFS-110 Course Approval.

Payment to Organization - If payment is to be made to an association or business, enter Name of Organization; Federal ID number; and course payment. Note: The total payments cannot exceed the amount listed on the BCCFS-110 Course Approval form.

Comments - Enter additional comments.

Signature - Course Manager or Instructor of Record must sign and date the form.

Note: Depending on work fluctuations during the busy testing seasons, instructors and students should not expect to receive certificates or payments for 4-8 weeks from the date that the OFFT receives the paperwork.